

2023 U.S. annual enrollment quick reference

Enroll **October 24 - November 11**

Prepare for 2023 decisions



2023 Benefits Decision Guide

Preparation details for 2023 BMS benefits enrollment



Videos

- BMS benefits & work life offerings
- Choosing your medical plan



2023 Frequently Asked Questions

FAQs about 2023 benefits & work life offerings

Get to know your benefits & providers



Virtual Benefits Fair

- Get to know the 2023 plans & programs straight from the providers
- Visit the BMS Information Booth to navigate to events and resources.

Enroll now at mybenefits.bms.com



1. Go to mybenefits.bms.com and find the “I want to” section on the top right of the screen
2. Use the **Health Benefits Decision Tool** to compare your estimated spending under each medical plan option
3. Make your **2023 benefits choices**, including pretax payroll deductions to a Health Savings Account (HSA) and/or Flexible Spending Accounts (FSAs); add or update dependent information
4. Submit your choices and review your **enrollment confirmation summary** to confirm your 2023 elections

My Personal Info & Actions

> myElections

I want to:

- > Enroll / Make Changes
- > Use Health Benefits Decision Tool and compare my medical options
- > View detailed Medical Summaries of Benefits Coverage

Important!

- To review your 2023 elections, click **myElections** (under My Personal Info & Actions) and click the **Annual Enrollment** box dated January 1, 2023.
- To make changes to your 2023 elections before November 11, 2022, you can **Restart** or **Modify** the Annual Enrollment event. If you do this, you will need to click **Next** within the event until you reach the end of the enrollment process to ensure your 2023 elections are appropriately recorded.

2023 benefits decisions during annual enrollment

- ✓ Medical & pharmacy
- ✓ Dental
- ✓ Vision
- ✓ Pretax accounts: health savings account (HSA) and/or flexible spending accounts (FSAs)
- ✓ Life insurance
- ✓ Supplemental health insurance
- ✓ Personal liability protection
- ✓ Personal ID theft & anti-virus protection
- ✓ Legal services

BMS also offers a wide range of work life offerings and financial savings and wellbeing resources available year-round that don’t require elections during annual enrollment.

If you don’t enroll

If you do not complete your enrollment event by November 11 you will:

- **Maintain your current elections for 2023** (subject to eligibility) for the following coverages: medical, dental, vision, life insurance, supplemental health insurance, personal liability protection, legal services and/or personal ID theft and anti-virus protection.
- **Not be able** to have current payroll deductions carry over for an HSA and/or FSA in 2023. These accounts require new elections each year.

Default coverage for 2023 applies to all who do not complete an enrollment event. If you fail to complete a valid enrollment event as of November 11, 2022, you will need to wait until annual enrollment for 2024 benefits to make any changes in coverage unless you have a life event such as marriage or birth of a child.

2023 medical & pharmacy key info*

(in-network coverage)

	Consumer Choice	Point of Service	In-Network Only
Medical (Aetna and UnitedHealthcare)			
Annual deductible	Individual coverage: \$1,500 Family coverage: \$3,000	\$500/individual \$1,500 family	\$300/individual \$600 family
Out-of-pocket maximum (incl. deductible)	Individual coverage: \$4,500 Family coverage: \$9,000	\$4,500 / \$9,000	\$2,500 / \$5,000
Preventive care	You pay \$0	You pay \$0	You pay \$0
Coinsurance (after deductible)	You pay 10%	You pay 10%	You pay 10%**
Copayment	N/A	N/A	Office visits: • Primary Care Physician - \$30 • Specialist - \$50
HSA company contribution	\$350 / \$700	N/A	N/A
Wellbeing incentive	\$400 / \$800 to HSA (federally tax-free)	\$400 / \$800 (taxable payroll contributions)	\$400 / \$800 (taxable payroll contributions)
Pharmacy Benefit Program (CVS Caremark)			
Annual deductible	Included in medical	N/A	N/A
Out-of-pocket maximum		\$2,000 / \$4,000	\$2,000 / \$4,000
Retail • Tier 1: Generic • Tier 2: CVS preferred • Tier 3: Non-CVS preferred	After deductible: • Tier 1: \$10 • Tier 2: 10% (\$20 min/\$35 max) • Tier 3: 10% (\$35 min/\$55 max)	• Tier 1: \$15 • Tier 2: 20% (\$25 min/\$45 max) • Tier 3: 20% (\$45 min/\$65 max)	
Mail order • Tier 1: Generic • Tier 2: CVS preferred • Tier 3: Non-CVS preferred	After deductible: • Tier 1: \$25 • Tier 2: 10% (\$50 min/\$87.50 max) • Tier 3: 10% (\$87.50 min/\$137.50 max)	• Tier 1: \$37.50 • Tier 2: 20% (\$62.50 min/\$112.50 max) • Tier 3: 20% (\$112.50 min/\$162.50 max)	

* See the [2023 Benefits Decision Guide](#) for details on out-of-network coverage and pharmacy coverage for branded BMS drugs (\$0 copay, after deductible in some cases).
** In-Network Only Plan coinsurance applies to hospital, inpatient and certain facility charges, such as X-ray and labs, after deductible. Office visits are copayment based.